

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 1565 / 4059

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Marco Rubio for President

A. Full Name (Last, First, Middle Initial)

KENT LATHAM

Mailing Address **2427 OLD RUSSELLVILLE PIKE**

City	State	Zip Code
CLARKSVILLE	TN	37040-6151

FEC ID number of contributing federal political committee.

C

Name of Employer
HOUSING AUTHORITY OF TODD CO.

Occupation
EXECUTIVE DIRECTOR

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17.831238

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

100.00

B. Full Name (Last, First, Middle Initial)

MR. KENNETH R. LATHAM

Mailing Address **28 WOODLEE ROAD**

City	State	Zip Code
COLD SPRING HARBOR	NY	11724-2315

FEC ID number of contributing federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Transaction ID : SA17.821108

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	8		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

250.00

C. Full Name (Last, First, Middle Initial)

MRS. MARY M. LATKA

Mailing Address **1701 MASSACHUSETTS AVENUE**
APARTMENT 305

City	State	Zip Code
WASHINGTON	DC	20036-2110

FEC ID number of contributing federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2016

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

260.00

Transaction ID : SA17.812678

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	4		2	0	1	5

CONTRIBUTION

Amount of Each Receipt this Period

25.00

Subtotal Of Receipts This Page (optional).....

375.00

Total This Period (last page this line number only).....